Package leaflet: Information for the user

Humalog® 200 units/ml KwikPen® solution for injection in a pre-filled pen (insulin lispro)

Each KwikPen delivers 1 – 60 units in steps of 1 unit.

Read all of this leaflet carefully before you start using this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor or pharmacist.
- This medicine has been prescribed for you only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

This product is called Humalog 200 units/ml KwikPen solution for injection in a pre-filled pen but will be referred to as Humalog throughout the leaflet.

What is in this leaflet

1. What Humalog 200 units/ml KwikPen is and what it is used for
2. What you need to know before you use Humalog 200 units/ml KwikPen
3. How to use Humalog 200 units/ml KwikPen
4. Possible side effects
5. How to store Humalog 200 units/ml KwikPen
6. Contents of the pack and other information

1. What Humalog 200 units/ml KwikPen is and what it is used for

Humalog 200 units/ml KwikPen is used to treat diabetes. Humalog works more quickly than normal human insulin because insulin lispro has been changed slightly in comparison to human insulin. Insulin lispro is closely related to human insulin which is a natural hormone made by the pancreas.

You get diabetes if your pancreas does not make enough insulin to control the level of glucose in your blood. Humalog is a substitute for your own insulin and is used to control glucose in the long term. It works very quickly and lasts a shorter time than soluble insulin (2 to 5 hours). You should normally use Humalog within 15 minutes of a meal.

Your doctor may tell you to use Humalog 200 units/ml KwikPen as well as a longer-acting insulin. Each kind of insulin comes with another patient information leaflet to tell you about it. Do not change your insulin unless your doctor tells you to. Humalog 200 units/ml KwikPen should be reserved for the treatment of adults with diabetes requiring daily doses of more than 20 units of rapid-acting insulin.

Humalog 200 units/ml KwikPen is a disposable pre-filled pen containing 3 ml (600 units, 200 units/ml) of insulin lispro. One KwikPen contains multiple doses of insulin. The KwikPen dials 1 unit at a time. **The number of units are displayed in the dose window, always check this before your injection.** You can give from 1 to 60 units in a single injection. **If your dose is more than 60 units, you will need to give yourself more than one injection.**

2. What you need to know before you use Humalog 200 units/ml KwikPen

Do NOT use Humalog 200 units/ml KwikPen
- if you are **allergic** to insulin lispro or any of the other ingredients of this medicine (listed in section 6).
- if you think **hypoglycaemia** (low blood sugar) is starting. Further in this leaflet it tells you how to deal with mild hypoglycaemia (see section 3: If you use more Humalog than you should).

Warnings and precautions
- Always check the pack and the label of the pre-filled pen for the name and type of the insulin when you get it from your pharmacy. Make sure you get the Humalog 200 units/ml KwikPen that your doctor has told you to use.
- T**he Humalog 200 units/ml solution for injection in your pre-filled pen (the KwikPen) should ONLY be injected with this pre-filled pen. Do not transfer the insulin lispro from your Humalog 200 units/ml KwikPen to a syringe.** The markings on the insulin syringe will not measure your dose correctly. A severe overdose can result, causing low blood sugar which may put your life in danger. Do not transfer insulin from your Humalog 200 units/ml KwikPen to any other insulin delivery devices like insulin infusion pumps.
- **Do NOT mix the Humalog 200 units/ml solution for injection in your pre-filled pen (the KwikPen) with any other insulin or any other medicine.** The Humalog 200 units/ml solution for injection should not be diluted.
- If your blood sugar levels are well controlled by your current insulin therapy, you may not feel the warning symptoms when your blood sugar is falling too low. Warning signs are listed in section 4 of this leaflet. You must think carefully about when to have your meals, how often to exercise and how much to do. You must also keep a close watch on your blood sugar levels by testing your blood glucose often.
- A few people who have had hypoglycaemia after switching from animal insulin to human insulin have reported that the early warning symptoms were less obvious or different. If you often have hypoglycaemia or have difficulty recognising it, please discuss this with your doctor.
- If you answer YES to any of the following questions, tell your doctor, pharmacist or diabetes nurse
  - Have you recently become ill?
  - Do you have trouble with your kidneys or liver?
  - Are you exercising more than usual?
- You should also tell your doctor, pharmacist or diabetes nurse if you are planning to go abroad. The time difference between countries may mean that you have to have your injections and meals at different times from when you are at home.
- Some patients with long-standing type 2 diabetes mellitus and heart disease or previous stroke who were treated with pioglitazone and insulin experienced the development of heart failure. Inform your doctor as soon as possible, if you experience signs of heart failure such as unusual shortness of breath or rapid increase in weight or localised swelling (oedema).
- This Pen is not recommended for use by the blind or visually impaired without the help of someone trained to use the Pen.

Skin changes at the injection site
The injection site should be rotated to prevent skin changes such as lumps under the skin. The insulin may not work very well if you inject into a lumpy area (See How to use Humalog 200 units/ml KwikPen). Contact your doctor if you are currently injecting into a lumpy area before you start injecting a different area. Your doctor may tell you to check your blood sugar more closely, and to adjust your insulin or your other antidiabetic medications dose.

Other medicines and Humalog 200 units/ml KwikPen
Your insulin needs may change if you are taking
- the contraceptive pill,
- steroids,
- thyroid hormone replacement therapy,
- oral hypoglycaemics (e.g. metformin, acarbose, sulphonylurea agents, pioglitazone, empagliflozin, DPP-4-inhibitors like sitagliptin or saxagliptine),
- acetyl salicylic acid,
- sulpha antibiotics,
- somatostatin analogues (such as octreotide, used to treat an uncommon condition in which you make too much growth hormone),
- “beta2 stimulants”such as salbutamol or terbutaline to treat asthma, or ritodrine used to stop premature labour,
- beta-blockers – to treat high blood pressure, or
- some antidepressants (monoamine oxidase inhibitors or selective serotonin reuptake inhibitors),
- danazol (medicine acting on ovulation),
- some angiotensin converting (ACE) inhibitors, used to treat certain heart conditions or high blood pressure (for example captopril, enalapril), and
- specific medicines to treat high blood pressure, kidney damage due to diabetes, and some heart problems (angiotensin II receptor blockers).

Please tell your doctor, if you are taking, have recently taken or might take any other medicines (see also section “Warnings and precautions”).

Humalog with alcohol
Your blood sugar levels may either rise or fall if you drink alcohol. Therefore the amount of insulin needed may change.

Pregnancy and breast-feeding
Are you pregnant or thinking about becoming pregnant, or are you breast-feeding? The amount of insulin you need usually falls during the first three months of pregnancy and increases for the remaining six months. If you are breast-feeding, you may need to alter your insulin intake or diet.
Ask your doctor for advice.

Driving and using machines
Your ability to concentrate and react may be reduced if you have hypoglycaemia. Please keep this possible problem in mind in all situations where you might put yourself and others at risk (e.g. driving a car or using machines). You should contact your doctor about the advisability of driving if you have:
- frequent episodes of hypoglycaemia
- reduced or absent warning signs of hypoglycaemia

Humalog 200 units/ml KwikPen contains sodium

This medicine contains less than 1 mmol sodium (23 mg) per dose, that is to say essentially ‘sodium-free’.

3. How to use Humalog 200 units/ml KwikPen

Always use this medicine exactly as your doctor has told you. You should check with your doctor if you are not sure. To prevent the possible transmission ofdisease, each pen must be used by you only, even if the needle is changed.

Humalog 200 units/ml KwikPen is for patients taking more than 20 units of rapid-acting insulin a day.

Do not transfer insulin from your Humalog 200 units/ml KwikPen to a syringe. The markings on the insulin syringe will not measure your dose correctly. A severe overdose can result, causing low blood sugar which may put your life in danger.

Do not use Humalog 200 units/ml KwikPen solution for injection in an insulin infusion pump.

Dose
- You should normally inject Humalog within 15 minutes of a meal. If you need to, you can inject soon after a meal. But your doctor will have told you exactly how much to use, when to use it, and how often. These instructions are only for you. Follow them exactly and visit your diabetes clinic regularly.
- If you change the type of insulin you use (for example from a human or animal insulin to a Humalog product), you may have to take more or less than before. This might just be for the first injection or it may be a gradual change over several weeks or months.
- Inject Humalog under the skin (subcutaneously).

Preparing Humalog 200 units/ml KwikPen
- Humalog is already dissolved in water, so you do not need to mix it. But you must use it only if it looks like water. It must be clear, have no colour and no solid pieces in it. Check each time you inject yourself.

Getting the KwikPen ready to use (Please see user manual)
- First wash your hands.
- Read the instructions on how to use your pre-filled insulin pen. Please follow the instructions carefully. Here are some reminders.
- Use a clean needle. (Needles are not included).
- Prime your KwikPen before each use. This checks that insulin comes out and clears the air bubbles from your KwikPen. There may still be some small air bubbles left in the pen - these are harmless. But if the air bubbles are too large it may affect the insulin dose.

Injecting Humalog
- Before you make an injection, clean your skin as you have been instructed.
- Inject under the skin, as you were taught. After your injection, leave the needle in the skin for five seconds to make sure you have taken the whole dose. Do not rub the area you have just injected. Make sure you inject at least half an inch (1 cm) from the last injection and that you ‘rotate’ the places you inject, as you have been taught. It doesn’t matter which injection site you use, either upper arm, thigh, buttock or abdomen, your Humalog injection will still work quicker than soluble human insulin.
- Do not inject Humalog 200 units/ml KwikPen solution for injection directly into a vein (intravenously).

After injecting
- As soon as you have done the injection, unscrew the needle from the KwikPen using the outer needle cap. This will keep the insulin sterile and stop it leaking. It also stops air entering the pen and your needle clogging. **Do not share your needles.** Do not share your pen. Replace the cap on your pen.

Further injections
- Every time you use a KwikPen you must use a new needle. Before every injection, clear any air bubbles. You can see how much insulin is left by holding the KwikPen with the needle pointing up.
- Once the KwikPen is empty, do not use it again. Please get rid of it carefully - your pharmacist or diabetes nurse will tell you how to do this.

If you use more Humalog than you should
If you use more Humalog than you need or are unsure how much you have injected, a low blood sugar may occur. Check your blood sugar. If your blood sugar is low (**mild hypoglycaemia**), eat glucose tablets, sugar or drink a sugary drink. Then eat fruit, biscuits, or a sandwich, as your doctor has advised you and have some rest. This will often get you over mild hypoglycaemia or a minor insulin overdose. If you get worse and your breathing is shallow and your skin gets pale, tell your doctor at once. A glucagon injection can treat quite severe hypoglycaemia. Eat glucose or sugar after the glucagon injection. If you do not respond to glucagon, you will have to go to hospital. Ask your doctor to tell you about glucagon.

If you forget to use Humalog
If you take less Humalog than you need or are unsure how much you have injected, a high blood sugar may occur. Check your blood sugar.

If hypoglycaemia (low blood sugar) or hyperglycaemia (high blood sugar) is not treated, they can be very serious and cause headaches, feeling sick (nausea), being sick (vomiting), loss of fluids (dehydration), unconsciousness, coma or even death (see section 4 “Possible side effects”).

Three simple steps to avoid hypoglycaemia or hyperglycaemia are:
- Always carry a spare pen in case you lose your KwikPen or it gets damaged.
- Always carry something to show you are diabetic.
- Always carry sugar with you.

If you stop using Humalog.
If you take less Humalog than you need, a high blood sugar may occur. Do not change your insulin unless your doctor tells you to.

If you have any further questions on the use of this medicine, ask your doctor or pharmacist.

4. Possible side effects

Like all medicines, this medicine can cause side effects, although not everybody gets them.

Severe allergy is rare (may affect up to 1 in 1,000 people). The symptoms are as follows:

- rash over the whole body
- difficulty in breathing
- wheezing
- blood pressure dropping
- heart beating fast
- sweating

If you think you are having this sort of insulin allergy with Humalog, contact a doctor at once.

Local allergy is common (may affect up to 1 in 10 people). Some people get redness, swelling or itching around the area of the insulin injection. This usually clears up in anything from a few days to a few weeks. If this happens to you, tell your doctor.

Lipodystrophy is uncommon (may affect up to 1 in 100 people). If you inject insulin too often at the same place, the fatty tissue may either shrink (lipoatrophy) or thicken (lipohypertrophy). Lumps under the skin may also be caused by build-up of a protein called amyloid (cutaneous amyloidosis). The insulin may not work very well if you inject into a lumpy area. Change the injection site with each injection to help prevent these skin changes.

Oedema (e.g. swelling in arms, ankles; fluid retention) has been reported, particularly at the start of insulin therapy or during a change in therapy to improve control of your blood glucose.

Reporting of side effects
If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via Yellow Card Scheme, website: www.mhra.gov.uk/yellowcard or search for MHRAYellow Card in the Google Play or Apple App Store. By reporting side effects you can help provide more information on the safety of this medicine.
Common problems of diabetes

Hypoglycaemia
Hypoglycaemia (low blood sugar) means there is not enough sugar in the blood. This can be caused if:
- you take too much Humalog or other insulin;
- you miss or delay meals or change your diet;
- you exercise or work too hard just before or after a meal;
- you have an infection or illness (especially diarrhoea or vomiting);
- there is a change in your need for insulin; or
- you have trouble with your kidneys or liver which gets worse.

Alcohol and some medicines can affect your blood sugar levels (see section 2).

The first symptoms of low blood sugar usually come on quickly and include the following:

- tiredness
- nervousness or shakiness
- headache
- rapid heartbeat
- feeling sick
- cold sweat

While you are not confident about recognising your warning symptoms, avoid situations such as driving a car, in which you or others would be put at risk by hypoglycaemia.

Hyperglycaemia and diabetic ketoacidosis
Hyperglycaemia (too much sugar in the blood) means that your body does not have enough insulin. Hyperglycaemia can be brought about by:
- not taking your Humalog or other insulin;
- taking less insulin than your doctor tells you to;
- eating a lot more than your diet allows; or
- fever, infection or emotional stress.

Hyperglycaemia can lead to diabetic ketoacidosis. The first symptoms come on slowly over many hours or days. The symptoms include the following:

- feeling sleepy
- flushed face
- thirst
- no appetite
- fruity smell on the breath
- feeling or being sick

Severe symptoms are heavy breathing and a rapid pulse. **Get medical help immediately.**

Illness
If you are ill, especially if you feel sick or are sick, the amount of insulin you need may change. **Even when you are not eating normally, you still need insulin.** Test your urine or blood, follow your ‘sick rules’, and tell your doctor.

If the medicine becomes discolored or shows any other signs of deterioration, you should seek the advice of your pharmacist who will tell you what to do.

5. How to store Humalog 200 units/ml KwikPen

Keep this medicine out of the sight and reach of children.

Do not use this medicine after the expiry date which is stated on the label and the carton. The expiry date refers to the last day of that month.

Before the first use store your Humalog **200 units/ml** KwikPen in a refrigerator (2°C – 8°C). Do not freeze.

Keep your Humalog **200 units/ml** KwikPen in use at room temperature (below 30°C) and discard after 28 days. Do not put it near heat or in the sun. Do not keep the KwikPen that you are using in the fridge. The KwikPen should not be stored with the needle attached.

Do not use this medicine if you notice the solution is coloured or it has solid pieces in it. You must use it only if it looks like water. Check this each time you inject yourself.

Medicines should not be disposed of via wastewater or household waste. Ask your pharmacist how to dispose of medicines no longer required. These measures will help to protect the environment.

6. Contents of the pack and other information

What Humalog 200 units/ml KwikPen solution for injection contains
- The active substance is insulin lispro. Each ml of solution contains 200 units (U) of insulin lispro. Each pre-filled pen (3 ml) contains 600 units (U) of insulin lispro.
- The other ingredients are metacresol, glycerol, trometamol, zinc oxide and water for injection. Sodium hydroxide or hydrochloric acid may have been used to adjust the acidity.

What Humalog 200 units/ml KwikPen looks like and contents of the pack
Humalog 200 units/ml KwikPen solution for injection is a sterile, clear, colourless, aqueous solution and contains 200 units of insulin lispro in each millilitre (200 units/ml) solution for injection. Each Humalog **200 units/ml** KwikPen contains 600 units (3 millilitres). The Humalog **200 units/ml** KwikPen comes in a pack of 1, 5 pre-filled pens. Not all pack sizes may be marketed. The KwikPen simply has a built in cartridge. When the pre-filled pen is empty you cannot use it again.

Manufacturer:
Eli Lilly Italia S.p.A., Via Gramsci 731-733, 50019 Sesto Fiorentino, (FI) Italy.

Procured from within the EU and repackaged for the PL Holder: Abacus Medicine Ltd., Abbey House, 282 Farnborough Road, Farnborough, GU14 7NA, United Kingdom

PL: 45763/1826

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For any information about this medicine, please contact the local representative of the Product Licence Holder:

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drugsafetyuk@abacusmedicine.co.uk

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Humalog® 200 units/ml KwikPen® solution for injection in a pre-filled pen

(insulin lispro)



PLEASE READ THIS USER MANUAL BEFORE USE

⚠ USE ONLY IN THIS PEN, OR SEVERE OVERDOSE CAN RESULT

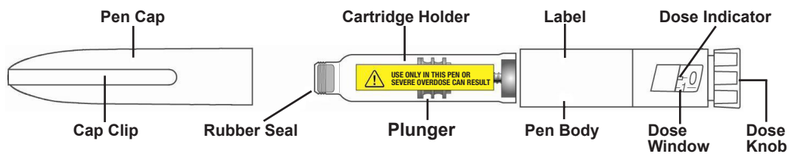
Read the User Manual before you start taking Humalog 200 units/ml KwikPen solution for injection and each time you get another Humalog 200 units/ml KwikPen. There may be new information.
This information does not take the place of talking to your healthcare professional about your medical condition or your treatment. Humalog 200 units/ml KwikPen ("Pen") is a disposable pre-filled pen containing 3 ml (600 units, 200 units/ml) of insulin lispro solution for injection. You can give yourself multiple doses using one Pen. The Pen dials 1 unit at a time. You can inject from 1 to 60 units in a single injection. If your dose is more than 60 units, you will need to give yourself more than one injection. The plunger only moves a little with each injection, and you may not notice that it moves. The plunger will only reach the end of the cartridge when you have used all 600 units in the Pen. This pen is designed to allow you to give more doses than other pens you may have used in the past. Dial your usual dose as instructed by your healthcare professional.

Humalog KwikPen is available in two strengths, 100 units/ml and 200 units/ml. Inject Humalog 200 units/ml ONLY with your Pen. DO NOT transfer insulin from your Pen to another insulin delivery device. Syringes and insulin pumps will not dose 200 units/ml insulin correctly. A severe overdose can result, causing very low blood sugar which may put your life in danger.

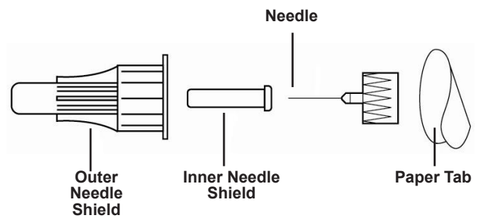
Do not share your Pen with other people, even if the needle has been changed. Do not reuse or share needles with other people. You may give an infection to them or get an infection from them.

This Pen is not recommended for use by the blind or visually impaired without the help of someone trained to use the Pen.

KwikPen Parts



Pen Needle Parts (Needles Not Included)



Dose Knob with burgundy ring



How to recognize your Humalog 200 units/ml KwikPen:

- Pen colour: Dark grey
- Dose Knob: Dark grey with burgundy ring on the end
- Labels: Burgundy, "200 units/ml" in yellow box. Yellow warning on cartridge holder

Supplies needed to give your injection:

- Humalog 200 units/ml KwikPen
- KwikPen compatible Needle (BD [Becton, Dickinson and Company] Pen Needles recommended)
- Swab

Needles and swab are not included.

Preparing your Pen

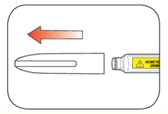
- Wash your hands with soap and water.
- Check the Pen to make sure you are taking the right type of insulin. This is especially important if you use more than 1 type of insulin.
- Do not use your Pen past the expiration date printed on the Label or for more than 28 days after you first start using the Pen.
- Always use a **new Needle** for each injection to help prevent infections and blocked Needles.

Step 1:

Pull the Pen Cap straight off.
- **Do not** remove the Pen Label.

Wipe the Rubber Seal with a swab.

Humalog 200 units/ml solution for injection should look clear and colourless. **Do not** use if it is cloudy, coloured, or has particles or clumps in it.





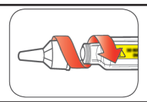
Step 2:

Select a new Needle.
Pull off the Paper Tab from the Outer Needle Shield.



Step 3:

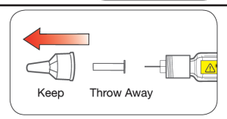
Push the capped Needle straight onto the Pen and twist the Needle on until it is tight.



Step 4:

Pull off the Outer Needle Shield.
Do not throw it away.

Pull off the Inner Needle Shield and throw it away.

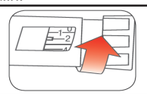


Priming your Pen

Prime before each injection.
- Priming your Pen means removing the air from the Needle and Cartridge that may collect during normal use and ensures that the Pen is working correctly.
- If you do not prime before each injection, you may get too much or too little insulin.

Step 5:

To prime your Pen, turn the Dose Knob to **select 2 units.**



Step 6:

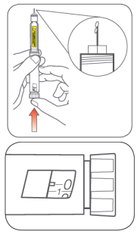
Hold your Pen with the Needle pointing up.
Tap the Cartridge Holder gently to collect air bubbles at the top.



Step 7:

Continue holding your Pen with Needle pointing up. Push the Dose Knob in until it stops, and "**0**" is seen in the Dose Window. Hold the Dose Knob in and **count to 5 slowly.**
- You should see insulin at the tip of the Needle.
  - If you do not see insulin, repeat the priming steps, but not more than 8 times.
  - If you still do not see insulin, change the Needle and repeat the priming steps.

Small air bubbles are normal and will not affect your dose.



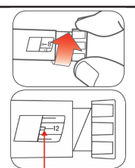
Selecting your dose

This pen has been designed to deliver the dose that is shown in the window.
Dial your usual dose as instructed by your healthcare professional.
- You can give from 1 to 60 units in a single injection.
- If your dose is more than 60 units, you will need to give more than one injection.
  - If you need help deciding how to divide up your dose, ask your healthcare professional.
  - You should use a new Needle for each injection and repeat the priming step.

Step 8:

Turn the Dose Knob to select the number of units you need to inject. The Dose Indicator should line up with your dose.
- The Pen dials 1 unit at a time.
- The Dose Knob clicks as you turn it.
- DO NOT dial your dose by counting the clicks because you may dial the wrong dose.
- The dose can be corrected by turning the Dose Knob in either direction until the correct dose lines up with the Dose Indicator.
- The **even** numbers are printed on the dial.
- The **odd** numbers, after the number 1, are shown as full lines.

Always check the number in the Dose Window to make sure you have dialled the correct dose.



(Example: 12 units shown in the Dose Window)



(Example: 25 units shown in the Dose Window)

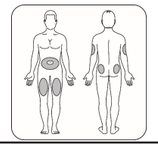
- The Pen will not let you dial more than the number of units left in the Pen.
- If you need to inject more than the number of units left in the Pen, you may either:
- inject the amount left in your Pen and then use a new Pen to give the rest of your dose, **or**
- get a new Pen and inject the full dose.

Giving your injection

- Inject your insulin as your healthcare professional has shown you.
- Change (rotate) your injection site for each injection.
- Do not try to change your dose while injecting.

Step 9:

Choose your injection site.
Humalog 200 units/ml solution for injection is injected under the skin (subcutaneously) of your stomach area, buttocks, upper legs or upper arms. Wipe your skin with a swab, and let your skin dry before you inject your dose.



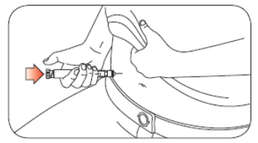
Step 10:

Insert the Needle into your skin.
Push the Dose Knob all the way in.



Continue to hold the Dose Knob in and **slowly count to 5** before removing the Needle.

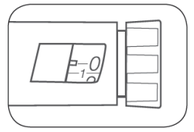
Do not try to inject your insulin by turning the Dose Knob. You will NOT receive your insulin by turning the Dose Knob.



Step 11:

Pull the Needle out of your skin.
- A drop of insulin at the Needle tip is normal. It will not affect your dose.
- Check the number in the Dose Window. If you see "0" in the Dose Window, you have received the full amount you dialled.
- If you do not see "0" in the Dose Window, do not redial. Insert the needle into your skin and finish your injection.
- If you still do not think you received the full amount you dialled for your injection, do not start over or repeat that injection. Monitor your blood glucose as instructed by your healthcare professional.

The plunger only moves a little with each injection and you may not notice that it moves. If you see blood after you take the Needle out of your skin, press the injection site lightly with a piece of gauze or a swab. Do not rub the area.



After your injection

Step 12:

Carefully replace the Outer Needle Shield.



Step 13:

Unscrew the capped Needle and dispose of it as described below (see Disposing of Pens and Needles section).
Do not store the Pen with the Needle attached to prevent leaking, blocking the Needle, and air from entering the Pen.



Step 14:

Replace the Pen Cap by lining up the Cap Clip with the Dose Indicator and pushing straight on.



Disposing of Pens and Needles

- Put used Needles in a sharps container or hard plastic container with a secure lid. Do not throw needles directly into your household waste.
- Do not recycle the filled sharps container.
- Ask your healthcare professional about options to dispose of the Pen and the sharps container properly.
- The directions regarding needle handling are not intended to replace local, healthcare professional or institutional policies.

Storing your Pen

Unused Pens
- Store unused Pens in the refrigerator at 2°C to 8°C.
- Do not freeze Humalog 200 units/ml solution for injection. Do not use if it has been frozen.
- Unused Pens may be used until the expiration date printed on the Label, if the Pen has been kept in the refrigerator.

In-use Pen
- Store the Pen you are currently using at room temperature (below 30°C) and away from dust, food and liquids, heat and light.
- Throw away the Pen you are using after 28 days, even if it still has insulin left in it.

General information about the safe and effective use of your Pen

- Keep your Pen and Needles out of the sight and reach of children.
- Do not use your Pen if any part looks broken or damaged.
- Always carry an extra Pen in case yours is lost or damaged.

Troubleshooting
- If you cannot remove the Pen Cap, gently twist the cap back and forth, and then pull the cap straight off.
- If the Dose Knob is hard to push;
  - Pushing the Dose Knob more slowly will make it easier to inject.
  - Your Needle may be blocked. Put on a new Needle and prime the Pen.
  - You may have dust, food, or liquid inside the Pen. Throw the Pen away and get a new Pen. You may need to get a prescription from your healthcare professional.
- **Do not transfer insulin from the Pen to a syringe or an insulin pump. Severe overdose can result.**

If you have any questions or problems with your Humalog 200 units/ml KwikPen, call your healthcare professional for help or contact your local Lilly affiliate.

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